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Bib Data Sheet

CONFIRMATION NO. 5199

<b>SERIAL NUMBER</b> 10/520,650	<b>FILING OR 371(c) DATE</b> 01/07/2005 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1616	<b>ATTORNEY DOCKET NO.</b> 49102
<b>APPLICANTS</b> Anthony E. Winston, East Brunswick, NJ; Carl Mayer, Woodbury Heights, NJ;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/20994 07/07/2003 <i>KG</i> which claims benefit of 60/394,770 07/10/2002				
<b>** FOREIGN APPLICATIONS *****</b> <i>KG</i>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>KG</i> Examiner's Signature <i>KG</i> Initials		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 5
				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 45980				
<b>TITLE</b> Composition for lessening malodors during hair treatment and hair removal and method of use				
<b>FILING FEE RECEIVED</b> 600	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	